



**APPLICATION FOR AMERICAN
FISHERIES ACT (AFA)
MOTHERSHIP &
INSHORE PROCESSOR
PERMIT**

United States Department of Commerce
National Oceanic and Atmospheric Administration
National Marine Fisheries Service, Alaska Region
P.O. Box 21668
Juneau, Alaska 9980



BLOCK A - TYPE OF PERMIT REQUESTED

To be an AFA Inshore Processor: you must have processed BSAI pollock in 1996 or 1997.

To be an AFA Mothership: your vessel must be one of the three named in the AFA, Section 208(d).

1. Type of processor: ☐ Mothership ☐ Inshore Processor (Stationary Floating Processor or Shoreside Processor)

If you selected Inshore Processor, indicate round weight amounts of pollock you processed:

- ☐ more than 2,000 round mt of BSAI pollock in each of 1996 and 1997; **or**
☐ less than 2,000 round mt of BSAI pollock during either or both years 1996 or 1997.

2. AFA Co-op Endorsement. Do you intend to receive fish for processing from an AFA Co-op?

☐ Yes ☐ No If YES, you must also complete Block F.

BLOCK B - MOTHERSHIP INFORMATION

1. Mothership Name

2. ADF&G Processor Code

3. U.S. Coast Guard Documentation
Number

4. Federal Fisheries Permit Number

5. Gross Tons

6. Shaft Horsepower

7. Registered Length (Feet)

8. Business Telephone Number

9. Business FAX Number

10. Business E-mail Address

BLOCK C - STATIONARY FLOATING PROCESSOR INFORMATION

1. Stationary Floating Processor Name

2. Federal Processor Permit Number

3. ADF&G Processor Code

4. U.S. Coast Guard Documentation
Number

5. Gross Tons

6. Shaft Horsepower

7. Registered Length (Feet)

8. Single Geographic Location (latitude/longitude) of Last Pollock Processing Activity During 1996 - 1997

9. Business Telephone Number

10. Business FAX Number

11. Business E-mail Address

BLOCK D - SHORESIDE PROCESSOR INFORMATION

1. Shoreside Processor Name

2. Federal Processor Permit Number

3. ADF&G Processor Code

4. Business Street Address (Street, city, state, zip code).

5. Business Telephone Number

6. Business FAX Number

7. Business E-mail Address

BLOCK E - OWNER INFORMATION

1. Owner Name(s)

2. SSN or Tax ID Number

3. Business Mailing Address (Street or box, city, state, zip code)

4. Business Telephone Number

5. Business FAX Number

6. Business E-mail Address

7. Managing Company, if any

BLOCK F - ASSOCIATED ENTITY/CRAB FACILITY INFORMATION

Provide the following information:

ASSOCIATED ENTITY: all individuals, corporations or other entities directly or indirectly owning or controlling a 10 percent or greater interest in the mothership or inshore processor that is the subject of this permit application; and

CRAB FACILITY: each other facility (including any shoreside processor, stationary floating processor, mothership, catcher/processor, or any other processing operation) that processes Bering Sea or Aleutian Island king or Tanner crab and in which the Associated Entity directly or indirectly owns or controls a 10 percent or greater interest.

Note: if any of the information provided changes, submit an amended application to NMFS, RAM within 30 days of the date of the change.

BLOCK F - ASSOCIATED ENTITY/CRAB FACILITY INFORMATION (CONTINUED)**ASSOCIATED ENTITY INFORMATION****OWNER LISTED IN BLOCK E****CRAB PROCESSING FACILITY INFORMATION**

1. Facility Name

2. ADF&G Processor Code (F___)

3. Type of Facility

- ☐ Shoreside processor
☐ Stationary floating processor
☐ Other operation (Describe)

- ☐ Mothership
☐ Catcher/processor

4. Federal Fishery Permit or Federal Processor Permit (circle one and indicate number)

5. Describe nature and percentage of interest in crab processing facility

CRAB PROCESSING FACILITY INFORMATION

1. Facility Name

2. ADF&G Processor Code (F___)

3. Type of Facility

- ☐ Shoreside processor
☐ Stationary floating processor
☐ Other operation (Describe)

- ☐ Mothership
☐ Catcher/processor

4. Federal Fishery Permit or Federal Processor Permit (circle one and indicate number)

5. Describe nature and percentage of interest in crab processing facility

CRAB PROCESSING FACILITY INFORMATION

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2. ADF&G Processor Code (F___)

3. Type of Facility

- ☐ Shoreside processor
☐ Stationary floating processor
☐ Other operation (Describe)

- ☐ Mothership
☐ Catcher/processor

4. Federal Fishery Permit or Federal Processor Permit (circle one and indicate number)

5. Describe nature and percentage of interest in crab processing facility

Attach additional sheets, if necessary, to list all entities and facilities.

BLOCK F - ASSOCIATED ENTITY/CRAB FACILITY INFORMATION (CONTINUED)**ASSOCIATED ENTITY INFORMATION**

1. Entity Name	2. SSN or Tax ID Number
3. Business Mailing Address (Street or box, city, state, zip code)	4. Telephone Number
5. Describe nature and percentage of interest in processor identified in Block B, C, or D	

CRAB PROCESSING FACILITY INFORMATION

1. Facility Name	2. ADF&G Processor Code (F___)
3. Type of Facility <input type="checkbox"/> Shoreside processor <input type="checkbox"/> Stationary floating processor <input type="checkbox"/> Other operation (Describe) <input type="checkbox"/> Mothership <input type="checkbox"/> Catcher/processor	4. Federal Fishery Permit or Federal Processor Permit (circle one and indicate number)
5. Describe nature and percentage of interest in crab processing facility	

CRAB PROCESSING FACILITY INFORMATION

1. Facility Name	2. ADF&G Processor Code (F___)
3. Type of Facility <input type="checkbox"/> Shoreside processor <input type="checkbox"/> Stationary floating processor <input type="checkbox"/> Other operation (Describe) <input type="checkbox"/> Mothership <input type="checkbox"/> Catcher/processor	4. Federal Fishery Permit or Federal Processor Permit (circle one and indicate number)
5. Describe nature and percentage of interest in crab processing facility	

CRAB PROCESSING FACILITY INFORMATION

1. Facility Name	2. ADF&G Processor Code (F___)
3. Type of Facility <input type="checkbox"/> Shoreside processor <input type="checkbox"/> Stationary floating processor <input type="checkbox"/> Other operation (Describe) <input type="checkbox"/> Mothership <input type="checkbox"/> Catcher/processor	4. Federal Fishery Permit or Federal Processor Permit (circle one and indicate number)
5. Describe nature and percentage of interest in crab processing facility	

Attach additional sheets, if necessary, to list all entities and facilities.

BLOCK F - ASSOCIATED ENTITY/CRAB FACILITY INFORMATION (CONTINUED)**ASSOCIATED ENTITY INFORMATION**

1. Entity Name	2. SSN or Tax ID Number
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5. Describe nature and percentage of interest in processor identified in Block B, C, or D	

CRAB PROCESSING FACILITY INFORMATION

1. Facility Name	2. ADF&G Processor Code (F___)
3. Type of Facility <input type="checkbox"/> Shoreside processor <input type="checkbox"/> Stationary floating processor <input type="checkbox"/> Other operation (Describe) <input type="checkbox"/> Mothership <input type="checkbox"/> Catcher/processor	4. Federal Fishery Permit or Federal Processor Permit (circle one and indicate number)
5. Describe nature and percentage of interest in crab processing facility	

CRAB PROCESSING FACILITY INFORMATION

1. Facility Name	2. ADF&G Processor Code (F___)
3. Type of Facility <input type="checkbox"/> Shoreside processor <input type="checkbox"/> Stationary floating processor <input type="checkbox"/> Other operation (Describe) <input type="checkbox"/> Mothership <input type="checkbox"/> Catcher/processor	4. Federal Fishery Permit or Federal Processor Permit (circle one and indicate number)
5. Describe nature and percentage of interest in crab processing facility	

CRAB PROCESSING FACILITY INFORMATION

1. Facility Name	2. ADF&G Processor Code (F___)
3. Type of Facility <input type="checkbox"/> Shoreside processor <input type="checkbox"/> Stationary floating processor <input type="checkbox"/> Other operation (Describe) <input type="checkbox"/> Mothership <input type="checkbox"/> Catcher/processor	4. Federal Fishery Permit or Federal Processor Permit (circle one and indicate number)
5. Describe nature and percentage of interest in crab processing facility	

Attach additional sheets, if necessary, to list all entities and facilities.

BLOCK G- CERTIFICATION OF NOTARY AND APPLICANT

Under penalty of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented hereon is true, correct and complete.

1. Signature of owner:

2. Date:

3. Printed Name of owner:

4. Notary Public (Signature): ATTEST

6. Affix Notary Stamp or Seal Here:

5. Commission Expires:

Please mail completed application to NMFS Alaska Region, Restricted Access Management, P.O. Box 21668, Juneau, AK 99802-1668. If you need additional information, contact RAM at 1-800-304-4846 or 907-586-7202.

PRIVACY ACT STATEMENT: Your social security number is confidential and is protected under the Privacy Act. Disclosure of your Social Security Number (SSN) is voluntary. The primary purpose for soliciting the social security number is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required of persons seeking to participate in the groundfish fisheries authorized under AFA.



INSTRUCTIONS **Application for** **American Fisheries Act (AFA)** **Mothership & Inshore Processor Permit**

A separate application must be completed for each Mothership or Inshore processor (either a stationary floating processor or shoreside processor). Type or print legibly in ink; retain a copy of completed application. Completed forms should be mailed to: National Marine Fisheries Service (NMFS), Restricted Access Management (RAM), P.O. Box 21668, Juneau, AK 99802-1668. If you have questions about these permits, please call RAM at 907-586-7202 or 1-800-304-4846.

BLOCK A - TYPE OF PERMIT REQUESTED

To be an **AFA Inshore Processor** (Stationary Floating Processor or Shoreside Processor) you must have processed BSAI pollock in either 1996 or 1997.

To be an **AFA Mothership Processor** your vessel must be one of the three named in the AFA, Section 208(d) [see below].

- (1) EXCELLENCE (United States Coast Guard (USCG) documentation number 967502);
- (2) GOLDEN ALASKA (USCG documentation number 651041); and
- (3) OCEAN PHOENIX (USCG documentation number 296779).

1. Type of Processor - Check Mothership or Inshore Processor (Stationary Floating Processor or Shoreside Processor). If you select Inshore Processor, indicate the choice that describes round weight amounts of pollock you processed from the directed BSAI pollock fishery in 1996 and 1997.
2. AFA Co-op Endorsement - Do you intend to receive fish for processing from an AFA co-op? Indicate YES or NO. If YES, you must also complete Block F.

If the information provided in Block F changes, you must submit an amended application within 30 days of the date of the change.

BLOCK B - MOTHERSHIP INFORMATION

Complete Block B if a mothership.

1. Mothership Name - Enter complete mothership name as displayed in official documentation.
2. ADF&G Processor Code - Enter State of Alaska Department of Fish & Game (ADF&G) Intent to operate processor license number (example: F12345).
3. U.S. Coast Guard Documentation Number - Enter USCG documentation number (example: 566722).
4. Federal Fisheries Permit Number - Enter the Federal Fisheries permit number for the mothership.
5. Gross Tons of mothership from USCG documentation.
6. Shaft Horsepower of mothership from USCG documentation.
7. Registered Length (in feet) of mothership from USCG documentation.
8. Business Telephone Number - Enter business telephone number, including area code.
9. Business FAX Number - Enter business FAX number, including area code.
10. Business E-mail Address - Enter E-mail address, if any.

BLOCK C - STATIONARY FLOATING PROCESSOR INFORMATION

Complete Block C if a stationary floating processor. A stationary floating processor means a vessel of the United States operating as a processor in Alaska State waters that remains anchored or otherwise remains stationary at a single geographic position while receiving or processing groundfish harvested in the GOA or BSAI.

1. Stationary Floating Processor Name - Enter complete name as displayed in official documentation.
2. Federal Processor Permit Number - Enter the Federal Processor Permit number.
3. ADF&G Processor Code – Enter ADF&G Intent to operate processor license number (example: F12345).
4. U.S. Coast Guard Documentation Number - Enter USCG documentation number (example: 566722).
5. Gross tons from USCG documentation.
6. Shaft Horsepower from USCG documentation.
7. Registered Length (in feet) from USCG documentation.
8. Enter single geographic location in Alaska state waters (latitude and longitude) at which processor last processed pollock during the period 1996 - 1997.
9. Business Telephone Number - Enter business telephone number, including area code.
10. Business FAX Number - Enter business FAX number, including area code.
11. Business E-mail Address - Enter E-mail address, if any.

BLOCK D - SHORESIDE PROCESSOR INFORMATION

Complete Block D if a shoreside processor. A shoreside processor means “any person or vessel that receives unprocessed fish, except catcher/processors, motherships, buying stations, restaurants, or persons receiving fish for personal consumption or bait”.

1. Shoreside Processor Name - Enter complete name as displayed in official documentation.
2. Federal Processor Permit Number - Enter the Federal Processor Permit number.
3. ADF&G Processor Code – Enter ADF&G Intent to operate processor license number (example: F12345).
4. Enter complete business street address, including street number, city, state and zip code.
5. Business Telephone Number - Enter business telephone number, including area code.
6. Business FAX Number - Enter business FAX number, including area code.
7. Business E-mail Address - Enter E-mail address, if any.

BLOCK E - OWNER INFORMATION

Enter owner information for the processor listed in Block B, C, or D.

1. Owner Name(s) - Enter the full name(s) of the processor owner(s). If there is more than one owner, list the principal owner first. The permit will be issued to the first owner listed, with an *et al.* notation. The permit MUST be issued to the owner of the vessel or processor, not operators or lessees.
2. Social Security Number or Tax Identification Number - Enter social security number or tax identification number of owner.

PRIVACY ACT STATEMENT: *Your social security number is confidential and is protected under the Privacy Act. Disclosure of your Social Security Number (SSN) is voluntary. The primary purpose for soliciting the social security number is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.*

3. Business Mailing Address - Enter complete PERMANENT business mailing address of the owner, including state and zip code. Your permit will be sent to this address. If you need to have your permit sent to a different address, please enter your PERMANENT business address on the application and attach a note with your alternate address.
4. Business Telephone Number - Enter business telephone number of the owner, including area code.
5. Business FAX Number - Enter business FAX number of the owner, including area code.
6. Business E-mail Address - Enter business E-mail of the owner.
7. Managing Company - Enter the name of any company (other than the owner) that manages the operations of the processor

BLOCK F - ASSOCIATED ENTITY/CRAB FACILITY INFORMATION

Complete Block F if you intend to receive pollock from an AFA cooperative. *Note: if any of the information provided changes, submit an amended application to NMFS, RAM within 30 days of the date of the change.*

ASSOCIATED ENTITIES: *Entities that directly or indirectly own or control a 10 percent or greater interest in the mothership or inshore processor.*

Enter the requested Associated Entity information for each individual, corporation or other entity that either directly or indirectly owns or controls a 10 percent or greater interest in the mothership or inshore processor listed in Block B, C, or D. An indirect interest is one that passes through one or more intermediate entities. An entity's percentage of indirect interest is equal to the entity's percentage of direct interest in an intermediate entity multiplied by the intermediate entity's percentage of direct, or indirect, interest in the mothership, inshore processor or pollock harvesting entity, as the case may be. The term "control" includes: (1) ownership of more than 50% of the entity; (2) the right to direct the business of the entity; (3) the right to limit the actions of or replace the chief executive officer, a majority of the board of directors, any general partner, or any person serving in a management capacity of the entity; or (4) the right to direct the operation or manning of the mothership, inshore processor or pollock harvesting vessel, as the case may be. The term "control" does not include the right to simply participate in the above actions.

If interest in the subject processor is indirect – i.e., flows through one or more intermediate entities – the percentage of interest in the subject processor is determined through application of a multiplicative rule as follows:

TO DETERMINE PERCENT OF INTEREST

EXAMPLE A To determine Entity A's percent of interest in the subject processor	✓ When Entity A has a direct interest in Entity B and ✓ Entity B has a direct interest in the subject processor
MULTIPLY Entity A's percent of interest in Entity B and Entity B's percent of interest in the subject processor	<i>If product of interests is less than 10%,</i> Entity A's percent of interest in the subject processor is less than 10%. DO NOT LIST Entity A under Block F
	<i>If product of interests is equal to or greater than 10%,</i> Entity A's percent of interest in the subject processor is equal to or greater than 10%. LIST Entity A under Block F

EXAMPLE B To determine Entity A's percent of interest in the subject processor	✓ When Entity A has a direct interest in Entity B and ✓ Entity B has an indirect interest in the subject processor (flowing through one or more intermediate entities)
MULTIPLY Entity A's percent of interest in Entity B and Entity B's percent of interest in Entity C and Entity C's percent of interest in Entity D and so on until you reach the subject processor	<i>If product of interests is less than 10%,</i> Entity A's percent of interest in the subject processor is less than 10%. DO NOT LIST Entity A under Block F
	<i>If product of interests is equal to or greater than 10%,</i> Entity A's percent of interest in the subject processor is equal to or greater than 10%. LIST Entity A under Block F

Record the following information for each entity under Associated Entity information.

1. Entity Name -- Enter the full name of the entity.
2. Social Security Number or Tax Identification Number - Enter social security number or tax identification number of entity.

PRIVACY ACT STATEMENT: *Your social security number is confidential and is protected under the Privacy Act. Disclosure of your Social Security Number (SSN) is voluntary. The primary purpose for soliciting the social security number is to provide a unique identifier to verify the identity of the applicant(s) for issuance of a federal fishery permit and to avoid inappropriate release of confidential records related to federal commercial fishery permits. In the event it is not provided, NMFS will assign a unique code that will identify your records.*

3. Business Mailing Address - Enter the entity's complete PERMANENT business mailing address, including state and zip code.
4. Business telephone number - Enter business telephone number of the owner, including area code.
5. Describe nature and percentage of the entity's interest in the processor identified in Block B, C, or D.

NOTE: *the owner listed in Block E need not re-enter it's identifying information in Block F, but must provide the Crab Facility information described below.*

CRAB FACILITIES. *Facilities processing Bering Sea or Aleutian Island king or Tanner crab in which 10% or greater interest is directly or indirectly owned or controlled by the Associated Entity*

For each entity, enter the requested Crab Facility information for all processing facilities (other than the processor that is the subject of this permit application) that process Bering Sea or Aleutian Island king or Tanner crab and in which the entity directly or indirectly owns or controls a 10 percent or greater interest.

The procedure for determining whether a 10 percent or greater interest exists in a processing facility is the same as that outlined above for whether a 10 percent or greater interest exists in the subject processor. For purposes of this permit application, "processing facility" includes any shoreside processor, stationary floating processor, mothership, catcher/processor, or any other processing operation.

Record the following information for each crab facility:

1. Facility Name
2. ADF&G Processor Code, if applicable (example: F0000)
3. Type of Facility: Check either Shoreside processor, Stationary floating processor, Mothership, Catcher/processor, or other operation (describe)
4. Federal Fishery Permit or Federal Processor Permit.
Circle appropriate permit type.
If a mothership or catcher/processor, enter Federal Fishery Permit number.
If a shoreside processor or stationary floating processor, enter Federal Processor Permit number (Example AK991234 or PA1234).
5. Describe nature and percentage of the entity's interest in crab processing facility

EXAMPLES: The following examples may be helpful:

Example 1: A mothership is jointly owned by a number of entities (which could be individuals, corporations, other entities, or a mix thereof). Whether any of these entities must be listed under Block F depends on their percentage of ownership or control in the mothership. Any of the entities with a 10 percent or greater interest in the mothership would have to be listed under Block F.

Example 2: A mothership is wholly owned by corporation A, which in turn is owned by a number of shareholders (which could be individuals, corporations, other entities, or a mix thereof). Whether any of these shareholders must be listed under Block F depends on their percentage of ownership or control in corporation A. Any shareholder with a 10 percent or greater interest in corporation A would have to be listed under Block F.

Example 3: An inshore processor is wholly owned by corporation A, which in turn is owned by a number of shareholders, one of which is corporation B. Corporation B has a number of shareholders of its own. Whether any of corporation B's shareholders must be listed under Block F depends on the shareholder's percentage of interest in corporation B multiplied by corporation B's percentage of interest in corporation A. If the shareholder's interest in corporation B is 20 percent, and corporation B's interest in corporation A is 25 percent, then the shareholder's interest in Corporation A is only 5 percent (20 percent times 25 percent), in which case the shareholder is not required to be listed under Block F. However, since corporation B's interest in corporation A is 20 percent, corporation B would have to be listed under Block F.

Example 4: An inshore processor is wholly owned by corporation A, 50 percent of which is owned by corporation B. Corporation B also owns a 25 percent interest in corporation C, which wholly owns three catcher/processors which process Bering Sea or Aleutian Island king or Tanner crab. Since corporation B's interest in corporation A is equal to or greater than 10 percent, corporation B must be listed under Block F. In addition, since Corporation B's interest in corporation C is equal to or greater than 10 percent, each catcher/processor must also be listed under Block F.

BLOCK G - CERTIFICATION OF APPLICANT AND NOTARY

Sign, print and date the application in the presence of Notary Public. As a result of this requirement, **we will not process applications faxed to us.** Representatives acting on behalf of an applicant must submit proof of authorization to submit this application on their behalf.

1. Signature of the owner.
2. Date this application was signed.
3. Printed name of the owner.
- 4-6. Notary Certification. A Notary Public must Attest and affix Notary Stamp. Notary Public verification cannot be completed by the person submitting this application.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

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